

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects In  
Provide all known, required information. If required data field information is unknown



- 007

Page# 1 of 3

er) Internal ID  
1-11111072

\*Personal privacy\*

Row 1	Reporter Name  Administrative Data	Submission date.		
	Address <i>California</i>		Address	
	Phone # [REDACTED]		Phone #	
	Incident Status: <i>New</i>	Location and date of incident <i>California</i>	Date registrant became aware of incident. <i>3/11/2004</i>	Was incident part of larger study? <i>No</i>
Row 2	EPA Registration # (Product 1) <i>62719-4</i>	EPA Registration # (Product 2)	EPA Registration # (Product 3)	
Pesticide(s) Involved	A.I. (s) <i>Sulfuryl Fluoride</i>	A.I. (s)	A.I. (s)	
	Product 1 name <i>Vikane</i>	Product 2 Name	Product 3 Name	
	Exposed to concentrate prior to dilution? <i>No</i>	Exposed to concentrate prior to dilution?	Exposed to concentrate prior to dilution?	
	Formulation	Formulation	Formulation	
Row 3	Evidence label directions were not followed? <i>No</i> Intentional misuse? <i>No</i>	Incident site: (examples include home, yard, school, industrial, nursery/greenhouse, surface water, commercial turf, building/office, forest/ woods, agricultural (specify crop) right-of-way (rail, utility, highway)).  <i>Own Residence</i>	Situation (act of using product): (examples include mixing/loading, reentry, application, transportation, repair/ maintenance of application equipment, manufacturing/ formulating).  <i>Re-entry</i>	
Incident Circumstances	Applicator certified PCO? <i>Not applicable</i>			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff)  <i>See Incident Description</i>			

DERBI: 142657  
Report: Yes ☒  
If no, why:   
Date: *3-18-04*  
SC *H-C*  
No ☐

Brief description of incident circumstances.

*3/11/2004 11:03:46 AM Vikane/chloropicrin*

*Hx: House was txed on Jan 22. PCO cleared house on Sat, 3 days later. 3 people living in the house have developed a rash 2 weeks ago and now again one week ago from today. It is all over their entire body, BSA 100%. The rash has now turned into lesions. Eveybody has been txed with and unknown ABX from the MD.*

*A: Rec to either have PCO come back to house and clear it for all levels since is convinced is from the fumigation, or see Dermatologist for skin condition. They can accurately diagnose. Both Vikane is a gas and would not cause these and Chloropicrin is an upper respiratory irritant. At this point after having house fumigated it's unlikely this is related. Was on call 25 min and repeating advice. Transferred to DF.*

*3/11/2004 11:41:32 AM I spoke with [REDACTED] She wanted to know if skin lesions could be caused by Vikane or chloropicrin. She has multiple family members who developed these lesions about 1-2 weeks ago, all are being treated with ABX and the lesions seem to be healing. Application occurred Jan 22 04 and they reentered 3 days later. She did not state she ever developed any resp sxs upon reentry*

*A: Time to onset of sxs makes any relationship extremely unlikely. I discussed typical sxs associated with both chemicals.*

\*Personal privacy\*

# Voluntary Industry Reporting Form for 6(a)(2) Incident Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page# 3 of 3

Demographic information: Age: <b>39</b> Sex: <b>Female</b> Occupation (if relevant)	Exposure route: <b>Inhalation</b>	Was adverse effect result of suicide/homicide or attempted suicide/homicide? <b>No</b>	Was protective clothing worn (specify)?  <b>Not applicable</b>
If female, pregnant? <b>DNQ</b>	Was exposure occupational? <b>No</b> If yes, days lost due to illness:	Time between exposure and onset of symptoms: <b>See Symptoms</b>	
Type of medical care sought: (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient). <b>On-site</b>	List signs/symptoms/adverse effects  <b>Rash - 2 weeks or less , lesions 1 week or less</b>		If lab tests were performed, list test names and results (If available, submit reports)  <b>None Reported</b>
Exposure data: Amount of pesticide: Exposure duration: Weight: <b>UNK</b>			
Human severity category: <b>HC</b>			

This box can be used to provide any explanatory or qualifying information surrounding the incident. (add additional pages if necessary)

*Skin complications are not typically associated to exposures to Vikane or Chloropicrin, especially with such a delayed onset. The differential diagnosis for a dermatitis of this nature would include multiple potential etiologies. Re-entry into a treated dwelling is not permitted until Vikane levels drop below 5 ppm, a level known to be well below the threshold for potential toxicity.*

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**1-11111072**

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Demographic information: Age: <b>39</b> Sex: <b>Male</b> Occupation (if relevant)	Exposure route: <b>Inhalation</b>	Was adverse effect result of suicide/homicide or attempted suicide/homicide? <b>No</b>	Was protective clothing worn (specify)?  <b>Not applicable</b>
If female, pregnant? <b>DNQ</b>	Was exposure occupational? <b>No</b> If yes, days lost due to illness:	Time between exposure and onset of symptoms: <b>See Symptoms</b>	
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Demographic information: Age: <b>60</b> Sex: <b>Female</b> Occupation (if relevant)	Exposure route: <b>Inhalation</b>	Was adverse effect result of suicide/homicide or attempted suicide/homicide? <b>No</b>	Was protective clothing worn (specify)?  <b>Not applicable</b>
If female, pregnant? <b>DNQ</b>	Was exposure occupational? <b>No</b> If yes, days lost due to illness:	Time between exposure and onset of symptoms: <b>See Symptoms</b>	
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